

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	<i>pre</i>		24-06-01
<b>O.I.P.E. CLASSIFIER</b>	<i>MDN</i>	<i>10</i>	05-05-9
<b>FORMALITY REVIEW</b>	<i>SL</i>	<i>SC 886</i>	05-09-01
<b>RESPONSE FORMALITY REVIEW</b>			

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## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here